

Classification

REPORTS INVENTORY						CONTROL NO.	
PREPARE IN DUPLICATE						DDS/OL/PMS-3	
1. TITLE OF REPORT (if a fill-in report include Form No.)						2. TYPE OF REPORT	
# 3 - Not Mailed to Contractor						<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		<input checked="" type="checkbox"/> PERSONNEL <input type="checkbox"/> LOGISTICS <input type="checkbox"/> MEDICAL		<input type="checkbox"/> TRAINING <input type="checkbox"/> SECURITY <input type="checkbox"/> FINANCE		<input type="checkbox"/> ADMIN. GENERAL <input type="checkbox"/> OTHER (specify)	
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)		6. DISTRIBUTION (No. of components not number of copies)			
2		twice monthly		8			
7. FORMAT (memorandum, form computer print-out, etc)		8. ADP PROCESSING		9. DIRECTIVE AUTHORITY REQUIRING REPORT			
computer print-out		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		IF YES GIVE ADP PROCESSING NO. 24205			
10. PREPARING COMPONENT (include lowest level contributing information to report)		11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)					
OCS - PD/CAS, CSS, R&D, ICS; DD/P/CMG; DD/S&T/OEL, ORD; DD/I/NPIC		see 13					
12. COST FACTORS							
A. MANUAL PREPARATION AND REVIEW COSTS							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
DISTRIBUTION ONLY: 9	5.38	.25	=	1.34	24	=	32.16
B. COSTS OF COMPUTER PRODUCED REPORTS							
	no.pgs 20	no.cys 2		per pg .03	24		28.80
TOTAL COSTS PER YEAR						60.96	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.							
D/L memo dated 22 Nov 1967 to D/OCS							
14. FUTURE GOALS							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT						ESTIMATED SAVINGS	
<input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE						<input type="checkbox"/> OTHER (explain) <div style="display: flex; justify-content: space-between;"> <div>MAN-HOURS</div> <div>DOLLARS</div> </div>	
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION				18. EXTENSION	
8 Oct. 1970		Procurement Assistant				<div style="border: 1px solid black; width: 50px; height: 20px; display: flex; align-items: center; justify-content: center;"> S </div>	